

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000019739

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: PASSARELLI TRUCKING LLC

**Current Principal Place of Business:**

1250 NW 126TH AVE  
SUNRISE, FL 33323 US

**New Principal Place of Business:**

**Current Mailing Address:**

1250 NW 126TH AVE  
SUNRISE, FL 33323 US

**New Mailing Address:**

FEI Number: 20-4371487

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PASSARELLI, ROBERT A  
1250 NW 126TH AVE  
SUNRISE, FL, FL 33323 US

**Name and Address of New Registered Agent:**

PASSARELLI, ROBERT A  
1250 NW 126TH AVE  
SUNRISE, FL 33323 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT PASSARELLI

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PASSARELLI, ROBERT A  
Address: 1250 NW 126TH AVE  
City-St-Zip: SUNRISE, FL 33323 US

Title: MGRM ( ) Delete  
Name: PASSARELLI, VIRGINIA H  
Address: 1250 NW 126TH AVE  
City-St-Zip: SUNRISE, FL 33323 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT PASSARELLI

MGRM

04/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date